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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. EIG Holly Hill, LLC (Name of foreign limited liability company	y must end with the words "limited con	npany" or their abbreviation
"L.C." if not so contained in the name at pro-	esent.)	inputing of mon doordy faction
2. Delaware		
(Jurisdiction under the law of which foreig company is organized)	gn limited liability (FEI number	er, if applicable)
4	5. December 31, 204	.7
(Date of Organization)	(Duration: Year limited licease to exist or "perpetual	ability company will
6. Upon Qualification		#*
(Date first transacted busines	ss in Florida. (See sections 608,501, 60	08.502 and 817.155, F.S.)
7c/o EIG Operating Partnership,	L.P., 111 East Wayne Stree	t. Suite 500.
Fort Wayne, Indiana 46802	(Street address of principal office)	
	OL CACH BRITHEFFE HIGHIGE HIVELT	
* The company is managed by it NAME & ADDRESS: TIT	ity company in Florida: (attach a sole member. FLE: NAME & ADDRESS	وينين بيعان والمنافق المنافق المنافق المنافق والمنافق والمنافق والمنافق والمنافق والمنافق والمنافق والمنافق والمنافق
* The company is managed by it NAME & ADDRESS: FIT GAR-13 EIG Operating Partnership; in Mer	ity company in Florida: (attach a sole member. FLE: NAME & ADDRESS	dditional page if necessary)
* The company is managed by it NAME & ADDRESS: FITT Operating Partnership, L.P., 111 East Wayne Street, Suite 500, Fort Wayne, IN	ity company in Florida: (attach a sole member. FLE: NAME & ADDRESS	dditional page if necessary)
* The company is managed by it NAME & ADDRESS: FITT SQL-13 EIG Operating Partnership; L.P., 111 East Wayne Street,	ity company in Florida: (attach a sole member. FLE: NAME & ADDRESS	dditional page if necessary)
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* The company is managed by it NAME & ADDRESS: FITT Operating Partnership, L.P., 111 East Wayne Street, Suite 500, Fort Wayne, IN	ity company in Florida: (attach a sole member. FLE: NAME & ADDRESS	dditional page if necessary) TITLE:
* The company is managed by it NAME & ADDRESS: FITT Operating Partnership, L.P., 111 East Wayne Street, Suite 500, Fort Wayne, IN	ity company in Florida: (attach a sole member. FLE: NAME & ADDRESS	dditional page if necessary) TITLE: AHASSE P. P. D. T. D.
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* The company is managed by it NAME & ADDRESS: FITT Operating Partnership, L.P., 111 East Wayne Street, Suite 500, Fort Wayne, IN	ity company in Florida: (attach a sole member. FLE: NAME & ADDRESS	dditional page if necessary) TITLE: AHASSE P. P. D. T. D.

9. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of records in the state under the law of which it is organized. (A hotocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name	of the Limited Liability Company is:
EIG Holly F	Hill, LLC
	e and the Florida street address of the registered agent and office are:
	C T CORPORATION SYSTEM
	(Name)
	1200 South Pine Island Road
	Florida street address (P.O. Box NOT ACCEPTABLE)
	Plantation FL 33324
	(Cîty/State/Zip)
liability company agent and agree relating to the pr	ned as registered agent and to accept service of process for the above stated limited y at the place designated in this certificate, I hereby accept the appointment as registered to act in this capacity. I further agree to comply with the provisions of all statutes roper and complete performance of my duties, and I am familiar with and accept the y position as registered agent.
Johnson R.	Yando (Signature)

Filing Fee: \$35 for Designation of Registered Agent

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

Th	e undersigned member or authorized representative of a member of	
EI	G Holly Hill, LLC certifies:	
1)	the above named limited liability company has at least two members;	
2)	the total amount of cash contributed by the member(s) is	\$ 1,000.00 ;
-	if any, the agreed value of property other than cash contributed by member(s) is (A description of the property is attached and made a part hereto.) and	\$
4)	the total amount of cash and property contributed and anticipated to be contributed by member(s) is (This total includes amounts from 2 and 3 above.)	\$ <u>1,000.00</u>
	Signature of a member or authorized representative of a mem (In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	ber.
	Todd M. Jacobs, Secretary/Treasurer	- 14.3
	Typed or printed name of signee	

Filing Fee: \$250.00 for Application and Affidavit

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "EIG OPERATING PARTNERSHIP, L.P." IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTY-FIRST DAY OF AUGUST, A.D. 1998.

BEEN PAID TO DATE.



AUTHENTICATION: 8300

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